

www.dearbornnational.com/ers

Dearborn  National®

Strength. Independence. Solutions.



## TEXAS EMPLOYEES GROUP BENEFITS PROGRAM

Group Term Life Insurance and Optional Coverage for Active Employees  
Underwritten by Fort Dearborn Life Insurance Company®, a Dearborn National® brand company.

### THIS BROCHURE PROVIDES A BRIEF SUMMARY OF COVERAGE AVAILABLE TO ELIGIBLE ACTIVE EMPLOYEES.

Basic Group Term Life and Accidental Death and Dismemberment (AD&D)

Optional Group Term Life and AD&D

Dependent Group Term Life and AD&D

Accelerated Life Benefit

Voluntary Group AD&D

Short-term Disability

Long-term Disability

**ERS WEBSITE:**  
www.ers.state.tx.us

**DEARBORN NATIONAL PHONE NUMBER:**  
(855) 377-5433

**EVIDENCE OF INSURABILITY PHONE NUMBER:**  
(855) 377-5433

### BASIC LIFE AND AD&D COMES FREE WITH HEALTH INSURANCE\*

As a Texas Employees Group Benefits Program (GBP) health plan participant, you are also provided with, at no cost to you:

- ▲ \$5,000 Basic Group Term Life; and
- ▲ \$5,000 Group Accidental Death and Dismemberment (AD&D) insurance.

The Basic Group Term Life coverage includes:

- ▲ Extended Life Insurance Benefit if you become totally disabled prior to age 60;
- ▲ The opportunity to continue coverage if you leave employment; and
- ▲ Accelerated Life Benefit

### YOU CAN APPLY FOR MORE LIFE AND AD&D INSURANCE\*

You can also apply for up to four times your Annual Salary in Group Term Life insurance:

- ▲ Election 1 — One times Annual Salary
- ▲ Election 2 — Two times Annual Salary
- ▲ Election 3 — Three times Annual Salary
- ▲ Election 4 — Four times Annual Salary

You may choose Elections 1 and 2 without proof of good health, called evidence of insurability (EOI) during your first 31 days of employment. After the first 31 days, EOI is required. EOI is always required to qualify for Elections 3 and 4.

The Optional Group Term Life coverage includes:

- ▲ Extended Life Insurance Benefit if you become totally disabled prior to age 60;
- ▲ The opportunity to continue coverage if you leave employment;
- ▲ Accelerated Life Benefit; and
- ▲ Viatical Settlement

Note: This policy contains a Two-year Suicide Exclusion

### YOU CAN APPLY TO COVER YOUR FAMILY WITH LIFE AND AD&D\*

If you are an active employee, you can apply to cover your eligible spouse and all eligible dependent children in:

- ▲ \$5,000 Dependent Group Term Life; and
- ▲ \$5,000 Group Accidental Death and Dismemberment.

Your dependents will not be denied coverage if you apply within the first 31 days of your employment. Otherwise, EOI\*\* may be required.

The Dependent Group Term Life coverage contains a two-year suicide exclusion. If you leave employment, or in the event of your death, coverage includes a Conversion Privilege for your spouse.

Products and services marketed under the Dearborn National® brand and the star logo are underwritten and/or provided by Fort Dearborn Life Insurance Company® (Downers Grove, IL) and certain of its affiliates. Fort Dearborn Life Insurance Company® offers insurance products in all states (excluding New York, where it is not licensed and does not solicit business), the District of Columbia, the United States Virgin Islands, the British Virgin Islands, Guam and Puerto Rico. Product features and availability vary by state and company, and are solely the responsibility of each affiliate.

## ENROLLMENT IN VOLUNTARY ACCIDENTAL DEATH AND DISMEMBERMENT IS GUARANTEED\*

- ▲ You may select Voluntary Group AD&D coverage for yourself (You Only), or for yourself and eligible family members (You and Family).
- ▲ EOI\*\* is NOT required for you or your eligible family members.

### YOU ONLY

You Only coverage amounts are based on your age at the time you apply as follows:

Age	Coverage
<70	\$10,000 to \$200,000 in increments of \$5,000
70 to 74	\$6,500 to \$130,000 in increments of \$3,250
75 to 79	\$4,000 to \$80,000 in increments of \$2,000
80 to 84	\$2,500 to \$50,000 in increments of \$1,250
85 to 89	\$1,500 to \$30,000 in increments of \$750
90+	\$1,000 to \$20,000 in increments of \$500

### YOU AND FAMILY

You and Family coverage options are as described in the You Only section. Your eligible dependents' amounts of coverage will be:

Eligible Spouse	50% of your coverage
Eligible Child(ren) with no Eligible Spouse	10% of your coverage
Eligible Child(ren) with an Eligible Spouse	5% of your coverage

## SHORT-TERM DISABILITY INSURANCE PROTECTS YOUR INCOME WHEN YOU CAN'T WORK\*

You may apply for Short-term Disability Insurance designed to replace some of your income if you become disabled and are unable to work.

- ▲ Your maximum monthly benefit is the lesser of 66% of your insured monthly salary or \$6,600.
- ▲ Your Short-term Disability insured monthly salary amount is equal to your monthly salary up to \$10,000.
- ▲ If you are approved for this coverage, your minimum monthly benefit is 10% of your insured monthly salary.
- ▲ You may apply without EOI if you apply within the first 31 days of your initial eligibility.

### Benefits become payable after you:

- ▲ have been certified as totally disabled; and
- ▲ have used all of your sick leave, extended sick leave, and sick leave pool, or 30 consecutive days, whichever is greater.

Benefits may be paid to you for up to 5 months as long as you remain disabled.

### Your benefit will be reduced based on other sources of income you may be entitled to, such as:

- ▲ Workers' Compensation;
- ▲ Employees Retirement System of Texas (ERS) or Teacher Retirement System of Texas (TRS) disability retirement benefits; and
- ▲ Other group disability benefits.

## LONG-TERM DISABILITY INSURANCE PROTECTS YOUR INCOME WHEN YOU CAN'T WORK\*

You may apply for Group Long-term Disability Insurance designed to replace some of your income if you become disabled and are unable to work.

- ▲ Your maximum monthly benefit is the lesser of 60% of your insured monthly salary or \$6,000.
- ▲ Your Long-term Disability insured monthly salary amount is equal to your monthly salary up to \$10,000.
- ▲ If you are approved for this coverage, your minimum monthly benefit is 10% of your insured monthly salary for up to 12 months.
- ▲ You may apply without EOI if you apply within the first 31 days of your initial eligibility.

### Benefits become payable after you:

- ▲ have been certified as totally disabled; and
- ▲ have used all of your sick leave, extended sick leave, and sick leave pool, or 90 consecutive days, whichever is greater.

### The amount payable will be limited as follows:

- ▲ The maximum benefit period is determined by your age at the time of disability; and
- ▲ Your benefit will be reduced based on other sources of income you may be entitled to, such as:
  - Social Security Disability for you and any eligible dependents;
  - Workers' Compensation;
  - Employees Retirement System (ERS) or Teacher Retirement System (TRS) disability retirement benefits; and
  - Other group disability benefits.

\*Certain limitations apply to Basic Life and AD&D, Optional Group Term Life, Dependent Term Life, AD&D, Voluntary AD&D, Short-term Disability, and Long-term Disability coverages. Descriptions and limitations of these coverages are provided in the Group Term Life Insurance and Optional Coverages Benefits Book. (Policy #38000-A) These coverages are underwritten by Fort Dearborn Life Insurance Company. \*\*Evidence of insurability (EOI) means that you must provide medical information (which may include medical records and a physical exam) that requires review and approval by Fort Dearborn

Life Insurance Company (FDL) before coverage becomes effective. Your coverage will be effective the 1st of the month following the approval of your request for benefits. For EOI applications from ERS, call ERS toll-free at (877) 275-4377 or go to [www.ers.state.tx.us/customer\\_support/forms](http://www.ers.state.tx.us/customer_support/forms). Send to FDL at the address shown on the EOI Application. Product availability and product features may vary by state. Refer to your certificate for complete details and limitations of coverage. (FDL Policy number 2M-LTD-86)